

ESSAYS

In the spirit of summer, and especially summer reading, we asked a few well-read writers for an essay on a book or books exploring bioethics issues through story. The result is a compelling look at how we face our fears and hopes about biotechnology and medicine. A reading list appears at the end.

Biopower and the Liberationist Romance

BY BRUCE JENNINGS

Bioethics lives in the shadow of great structures and practices of power, and yet, it has not been notable for its contributions to an understanding of power.¹ Indeed, the narrative that bioethics has fashioned for itself has been mainly a liberationist romance: a quest narrative in which the individual, seeking autonomy, struggles against limitations, constraints, and inhibitions imposed by forces (rules, roles, institutions, interference by others, customs, traditions) from the outside.

Today this liberationist romance is being challenged, revised, and deepened from at least two angles. One, which might be referred to as “deontological humanism,” refines our comprehension of individual freedom and dignity beyond minimalist notions of self-reliance and freedom from others’ interference.² A second perspective, which offers a critical deconstruction of what it calls “biopolitics” and “biopower,” provides a more overtly political and systemic narrative of ethics in the face of power.³

From the point of view of these emerging critiques, biotechnology’s intervention into the minds and bodies of human beings threatens our rights, dignity, equality, and respect for each other. It also erodes the foundations of personhood, agency, and individual identity upon

which these ideals have been built. This is because, although ostensibly designed to benefit human subjects, biotechnology often is an objectifying and reductionistic form of power that erodes self (the “I” as a unique subject). Individuated subjects become fungible parts, edited transcripts, messages written in normal or mistaken codes (i.e., “healthy” people or people with genetic defects). Similarly, biopower and biotechnology alter the liberal, individualist notion of the political and moral community. The state is understood not as a social contract of mutual self-interest and cooperation among free and equal natural persons, but as a structure of protection designed to preserve the life of functional, productive, and efficient bodies, and to exclude dangerous, defective, or aberrant life.

The critique of biopower has been developing for several decades. An early focus, inspired by Foucault’s work and “labeling theory” in sociology, was on psychiatry and psychiatric institutions. In recent years, the biopower critique has broadened as genetic engineering and biotechnology have developed. From this point of view, it is interesting to compare what might be seen as an early novel of biopower with a more contemporary treatment. I know of no better examples for this purpose than Ken Kesey’s *One Flew Over the Cuckoo’s Nest* and Kazuo Ishiguro’s *Never Let Me Go*.

One Flew Over the Cuckoo’s Nest calls us to rethink conventional assumptions about normalcy, mental illness, freedom, therapy, and the manifestation of power in institutional culture and in therapeutic discourses of professional expertise. Its setting is a closed psychiatric hospital ward; its focus is the discourse of psychiatry and psychiatric nursing. The narrative voice is that of Chief Bromden, a huge Native American whose paranoia leads him to see himself as small and weak, and whose survival strategy is to become socially invisible by pretending to be deaf and dumb. Bromden sees that the power of the mental health care system is ubiquitously entrapping—just another manifestation of the power system of the broader society, or what the deconstructionists would call the biopolitical state. This power works like a fog; it is both intangible and blinding. If you can see it, you are

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diagnosable within its categories and may be singled out for special measures of control.

At the center of the struggle against power in *Cuckoo's Nest* is Randle P. McMurphy, a charming, rough-hewn ne'er-do-well who lives largely by impulse. He finds rules, schedules, and social structures of all kinds overly confining. He viscerally rejects authority and proceeds to violate, subvert, and outwit those who would confine him and his appetites in any way. By turns irresponsible and well-meaning, selfishly predatory and kind-hearted, he undergoes something of a moral education and transformation as the novel progresses.

When McMurphy enters the world of the locked ward, he enters a "total institution" unlike any he has encountered before.⁴ He has no idea of how entangling the coils of what he has stumbled into can be. His nemesis is Nurse Ratched (the "Big Nurse," as the physically much larger narrator, Chief Bromden, calls her), who exercises autocratic control of the ward. Once he recognizes that he will get nowhere by conning her with false subservience, McMurphy adopts a political strategy—he attempts to ferment resistance among the other inmates, most of whom he believes have psychological problems and symptoms not because they are really ill, but because they are being cowed and repressed by Nurse Ratched's regime. They are essentially sane men dwelling in a structurally insane place.

If Nurse Ratched is blinded by her tendency to see psychopathology wherever there is spontaneity and independence, McMurphy is equally blinded by his inability to fathom deep-seated problems and true mental illness. Ratched's influence induces passivity and helplessness; McMurphy's prompts action, taking risks, and seeking out novel emotional experiences. Both are careless about—if not indifferent to—the actual effect that their "therapies" have on others. To be sure, McMurphy's goal is to rehumanize by struggling against the dehumanizing power of the ward. One of the inmates, recognizing this, says to McMurphy: "They've still got their problems, just like all of us. They're still sick men in lots of ways. But at least there's that: they are sick *men* now. No more rabbits, Mack. Maybe they can be well men someday. I can't say" (p. 257). However, in the case of Billy Bibbit, a deeply troubled young man with enormous guilt, McMurphy's encouragement tragically misfires.

The final confrontation occurs when McMurphy contrives, with the help of an alienated night watchman, to

throw an after-hours party on the ward, complete with liquor and two prostitutes. One of these women and Billy have sexual relations during the evening. Arriving early the next morning, Nurse Ratched finds the ward in disarray and Billy in flagrante. She proceeds to shame and threaten Billy so severely (including saying that she will disclose his behavior to his mother—Billy's Achilles heel) that he later commits suicide. In response to this, McMurphy assaults Nurse Ratched, nearly strangling her. That is the excuse that the system needs to deal with McMurphy once and for all. He is labeled a dangerous psychopath and lobotomized. A few moments before McMurphy attacks the Big Nurse, Chief Bromden sums up the larger context of the confrontation with power on the ward:

The bioethics narrative has been mainly a liberationist romance: a quest in which the individual, seeking autonomy, struggles against outside forces. Today this is being challenged, revised, and deepened.

I looked at McMurphy out of the corner of my eye. . . . He was in his chair in the corner, resting a second before he came out for the next round—in a long line of next rounds. The thing he was fighting, you couldn't whip it for good. All you could do was keep on whipping it, till you couldn't come out any more and somebody else had to take your place. (p. 265)

Still, McMurphy is not a hero, and Ratched is not the villain. Setting up an opposition between good and evil does not give an adequate understanding of either power or the struggle against it. The power embodied in the ward is not fully under the control of any character, including Nurse Ratched. The overriding factor here is the logic of control, and biopower trumps professional nursing ethics, as it were, as Nurse Ratched is impelled by the need to preserve the order and power of the institutional world, rather than to honor her ethical commitment to the well-being and health of her patients. And again, the real threat to her control—and to the logic of biopower operating through her—is not the ethical principle of patient autonomy and rights, it is McMurphy's sheer life-force, which neither the daily indignities of the ward's routines nor the electroshock treatments he receives can suppress. Only a surgical lobotomy can quell it.

Where do we draw the line between ethically grounded therapy, on the one hand, and domination through the exercise of power, on the other? If we remain within the therapeutic frame—which is the perspective that has tended to predominate in medical ethics—psychiatry has been one area of medicine where the bioethical balance between respect for autonomy and beneficence has been especially difficult to

strike.⁵ To be sure, the therapeutic framework is concerned with power, but primarily the interpersonal power at work in the relationship between physician and patient. This overlooks what might be called “institutional” or “structural” power. This kind of power operates in the background, growing out of the ways in which bodies of knowledge are codified and made accessible (the work of Foucault has emphasized this aspect) and the ways in which social rules, roles, and relationships are organized over time into institutions (the work of Goffman has emphasized this aspect). Power is not something extrinsic that experts or institutions wield; it is inherent in and constitutive of scientific knowledge and social institutions as such.⁶

If Kesey’s concern is the exercise of power in the face of recalcitrant mind and unruly impulse, Kazuo Ishiguro, in his novel *Never Let Me Go*, is concerned with the exercise of biopower in the face of aging bodies and failing organs. The book’s setting is an imagined future regime of extensive organ procurement and transplantation, rationalized and made effective through human cloning. The narrator of *Cuckoo’s Nest* is a paranoid schizophrenic—or perhaps he is only pretending to be to escape the power world around him. Double perspectives of this kind allow Kesey to use irony not for the sake of detachment, but for the sake of moral outrage. *Never Let Me Go* is quite different in rhetoric and tone. The story is presented through the eyes of a quite ordinary and altogether conforming young woman, Kathy H., who is among the class of human clones created to serve as organ “donors” and “carers.” Carers are clones who, before they become donors themselves, are assigned to care for those in the donor phase of their lives as they are gradually killed (“completed”) by repeated organ retrievals.

Ishiguro’s narrative device allows him to insinuate this future system of biopower in faint outline, instead of describing it directly and in narrative detail as a typical work of science fiction would do.⁷ By adopting the perspective of one of the new class of human beings created by this system, and by tracing her gradually dawning awareness of her status and function in the world, Ishiguro explores ambivalence, defensive denial, and the complex process of identity formation. Kathy H. and her peers only gradually perceive that they are not a fortunate few, but members of what is, in reality, a stigmatized and oppressed group—a synthetic caste unable to propagate, educated to be passive and accepting of their role, and lacking any life-plan or future possibilities beyond that.

Cuckoo’s Nest is a study in the development of a political consciousness of rebellion and, to some degree, solidarity with other powerless individuals. Like Huck Finn, Chief Bromden escapes at the close of the novel and heads west toward a new life of freedom. By contrast, *Never Let Me Go* is a coming-of-age novel with characters for whom coming of age ultimately has little point. Its model is the genre of English boarding-school fiction—think *Goodbye, Mr. Chips*—but the boarding school for clone children, Hailsham, is as closed and narrowly bounded a space as Nurse Ratched’s locked psychiatric ward, albeit with a different emotional register.

The ward is a place people want to escape from but are (with the exception of McMurphy) afraid to; Hailsham is a place where no one wants to leave, but everyone is forced out of when their time comes to be of “service.” To be in the ward is to be cut off from the normal world outside, but at the price of loss of authentic mind (and human identity). To be a graduate of Hailsham is to be thrust into a world of new normalcy in which the price is loss of body, one organ at a time. Ishiguro’s critique of this new normalcy—this society made “healthier” through the biotechnological intersection of organ transplantation and artificial human reproduction—is understated compared with Kesey’s social criticism. (Indeed, Ishiguro is much the more subtle novelist

of the two.) But it is no less pointed and disturbing. The moral tension of Ishiguro’s novel resides both in questions about the nature of this organ replacement regime and in the tension between the individual senses of self-identity and self-worth of human beings who see themselves as persons, on the one hand, and the reality of a system and situation of power that uses them merely as bodies, on the other.

By only slowly and indirectly permitting the reality of the biopolitical system to emerge, Ishiguro is able to explore a question that has been central to the bioethics debate concerning the (as yet speculative) future of human cloning. What would it feel like to be a clone? What would it do to one’s sense of personhood, moral worth, and self-esteem to know that you were made, not begotten—created strategically for an overtly instrumental purpose? The answers are not straightforward. The Hailsham children rationalize the situation, neutralizing the implications of the small bits and pieces of the truth that they are told by the “guardians” (teachers at the school) or that they come to know by inference or rumor.

As young adults, they struggle more as they move toward clarity and confrontation with the meaning of their situation,

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but they are not necessarily inclined to rebel. At a climatic moment in the novel, one of the clones, Ruth, realizes what the place of her kind in the society really is, and this awareness profoundly challenges her sense of self and world. Yet her anger quickly dies, and she goes on to pursue her duty as a donor until she is completed. Indeed, Ishiguro turns the tables on the question. He explores the process by which a biopower regime could manipulate the clones into developing a sense of moral responsibility for and of moral calling to serve the recipients of their organs.⁸ This sense of responsibility is based at least in part on deception. It is also fostered through emotional support during childhood, which allows a sense of conscience and empathy to develop. But at best this is a thin palliative in the midst of what is finally revealed to the narrator and her friends to be a harsh, bigoted system that wields an overwhelming social and emotional power.

Near the end of the book, Kathy H. and some friends, now adults and about to begin their donations, locate the former head of Hailsham, Miss Emily. She reveals to them (and to the reader) for the first time the scope and logic of the biopower that has come to dominate their society:

when the great breakthroughs in science followed one after the other so rapidly, there wasn't time to take stock, to ask the sensible questions. Suddenly there were all these new possibilities laid before us, all these ways to cure so many previously incurable conditions. This is what the world noticed the most, wanted the most. And for a long time, people preferred to believe these organs appeared from nowhere . . . by the time they came to consider just how you were reared, whether you should have been brought into existence at all, well by then it is was too late. There was no way to reverse the process. How can you ask a world that has come to regard cancer as curable, how can you ask such a world to put away that cure, to go back to the dark days? . . . So for a long time you were kept in the shadows, and people did their best not to think about you. And if they did, they tried to convince themselves you weren't really like us. That you were less than human, so it didn't matter. (p. 262-63)

Neither *Cuckoo's Nest* nor *Never Let Me Go* provides us with a scheme for taming or resisting biopower; neither even offers anything like a politics to counter the current momentum to extend the therapeutic ever more deeply into the body and the mind. But both do offer essential reminders about how to assert and how to conserve human meaning. Kesey reminds us of the enduring historical recurrence of rebellion, the fact that there will always arise what Thomas Hobbes called a "stubbornness of passion" to weaken the edifice of the biopolitical Leviathan state.⁹ In this regard I suggest that *Cuckoo's Nest* be read against the philosophical backdrop of Albert Camus' *The Rebel*, a neglected, now all-but-forgotten work that is due for rediscovery.¹⁰

Ishiguro leaves us with reformers who have no more rounds left in them. His novel has no figure of freedom lighting out for the territories. His reminder is of a different sort, one that

reflects a social critic like George Orwell.¹¹ Ishiguro reminds us of the terrible cost of dehumanization and oppression that all of us, not only those who are oppressed, must pay. Like Orwell, he knows that when meanings disappear from our languages of self-understanding and social construction, then our capacity to think, to act, and even to feel in ways linked to those meanings disappears as well. Ishiguro gives us a world that his moral gaze does not so much condemn as reveal to be deeply wounded and impaired. Concepts like student, guardian, giving, caring, service, possibility, completion, holding on, and letting go are all turned inside out, rendered corrupt by euphemism and double entendre. The recipients of body parts from the stockroom of the donor caste in this society gain enhanced health at the price of emaciated meaning. They may live longer thanks to their biopower, but they will not humanly prosper.

1. R.C. Fox and J. Swazey, *Observing Bioethics* (New York: Oxford University Press, 2008).

2. L.R. Kass, *Life, Liberty and the Defense of Dignity: The Challenge for Bioethics* (San Francisco, Calif.: Encounter Books, 2002); J. Habermas, *The Future of Human Nature* (Cambridge, U.K.: Polity Press, 2003); President's Council on Bioethics, *Human Cloning and Human Dignity* (New York: Public Affairs, 2002); M. Sandel, *The Case Against Perfection: Ethics in the Age of Genetic Engineering* (Cambridge, Mass.: Harvard University Press, 2007); F. Fukuyama, *Our Posthuman Future: Consequences of the Biotechnology Revolution* (New York: Farrar, Straus, and Giroux, 2002); L.R. Kass and J.Q. Wilson, *The Ethics of Human Cloning* (Washington, D.C.: AEI Press, 1998); C.S. Lewis, *The Abolition of Man*, rev. ed. (1947; repr., New York: Macmillan, 1955); C.G. Mitchell, E.D. Pellegrino, J.B. Elshtain, et al., *Biotechnology and the Human Good* (Washington, D.C.: Georgetown University Press, 2007); M.C. Nussbaum and C. Sunstein, eds., *Clones and Clones: Facts and Fantasies about Human Cloning* (New York: W.W. Norton, 1998).

3. M. Foucault, *History of Madness* (New York: Routledge, 2009) and *The Birth of Biopolitics: Lectures at the Collège de France 1978–1979* (New York: Palgrave MacMillan, 2008); N. Rose, *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-First Century* (Princeton, N.J.: Princeton University Press, 2006); G. Agamben, *Homo Sacer: Sovereign Power and Bare Life* (Stanford, Conn.: Stanford University Press, 1998); R. Esposito, *Bios: Biopolitics and Philosophy* (Minneapolis: University of Minnesota Press, 2008).

4. E. Goffman, *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates* (Garden City, N.Y.: Anchor Books, 1961).

5. C.M. Culver and B. Gert, *Philosophy and Medicine: Conceptual and Ethical Issues in Medicine and Psychiatry* (New York: Oxford University Press, 1982).

6. D.L. Rosenhan, "On Being Sane in Insane Places," in T.J. Scheff, ed., *Labeling Madness* (Englewood Cliffs, N.J.: Prentice Hall, 1975), 54-74; R. Bayer, *Homosexuality and American Psychiatry* (Princeton, N.J.: Princeton University Press, 1987); S. Bloch and P. Reddaway, *Psychiatric Terror* (New York: Basic Books, 1977).

7. See A. Desai, "A Shadow World," *New York Review of Books*, September 22, 2005, available at <http://www.nybooks.com/articles/archives/2005/sep/22/a-shadow-world/?pagination=false>.

8. This involves the transformation of a role defined by institutional power into a moral aspect of self-identity and agency. A similar attitude has been observed on the part of surrogate mothers in Israel, who liken themselves to soldiers on a mission. See E. Teman, *Birthing A Mother: The Surrogate Body and the Pregnant Self* (Berkeley: University of California Press, 2010).

9. T. Hobbes, *Leviathan* pt 1, ch. 15, (Oxford, U.K.: Blackwell, 1946), 99.

10. A. Camus, *The Rebel: An Essay on Man in Revolt* (New York: Vintage Books, 1956).

11. G. Orwell, *Nineteen Eighty Four* (New York: New American Library, 1962), and "The Politics of the English Language," in *Collected Essays* (London, U.K.: Secker and Warburg, 1961).